institutions 144 are in Government Sector and 835 in Private Sector. Further, out of 349 B. Sc. (Nursing) course institutions 22 are in Govt. Sector and 327 in Private Sector. So far as the State of Uttranchal is concerned, there are two institutions approved by Indian Nursing Council (INC) as on 31st March 2005, out of which one each for GNM & B. Sc. (N) course and both are in private Sector.

(b) and (c) Indian Nursing Council has prescribed the guidelines for approval of such institutions. There is no such instance of irregular approval of any institution has been reported.

Bird Flu in South East Asia

1257. MS. PRAMILA BOHIDAR:
SHRI B.J. PANDA:

Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether it is a fact that the bird-flu is fast picking up in South-East Asian countries;

(b) whether it is also a fact that there is a real cause of worry in our country as a result thereof;

(c) if so, whether Government propose to set up a bird-monitoring project to guard against this menace, especially in the coastal region of Orissa; and

(d) if so, the details thereof?

THE MINISTER OF HEALTH AND FAMILY WELFARE (DR. ANBUMANI RAMDOSS): (a) to (d) The disease is spreading in South East Asian countries as well as in Europe & Africa. In Europe, the Avian Influenza has been reported in wild birds as well as in poultry. In India also, the disease has been reported in Navapur Taluka of Maharashtra and Uchchal Taluka of Gujarat.

Department of Animal Husbandry informed that there is no real cause of panic, as the disease is localized in the small pocket of Maharashtra, bordering the part of Gujarat. The disease has been contained in the affected areas. All the birds have been culled in the infected as well as surveillance zone and disinfection and sanitation process is undergoing in the area.

The Government does not propose to set up a seromonitoring project to guard against the menace. However, sero-surveillance is in progress in all the states of the country, including Orissa. The samples are being taken randomly from the birds and are being sent to High Security Animal Disease Laboratory, Bhopal. Besides the samples from Navapur, Maharshtra and Uchchal, Gujarat, none of the samples have been tested positive for Avian Influenza.

Falling Female Sex-Ratio

1258. DR. K. MALAISAMY: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether it is a fact that the female sex-ratio is falling drastically in the recent years;

(b) if so, the reasons for such a decline;

(c) what will be the implications if such falls is left unchecked; and

(d) the measures envisaged to check the fall of female children?

THE MINISTER OF HEALTH AND FAMILY WELFARE (DR. ANBUMANI RAMDOSS): (a) Sex ratio in India has declined over the century from 972 in 1901 to 927 in 1991. The sex ratio has since gone up to 933 in 2001. In contrast the child sex ratio for the age group of 0-6 years in 2001 in 927 girls per thousand boys against 945 recorded in 1991 Census.

(b) Some of the reasons commonly put forward to explain the consistently low levels of sex ratio are son preference, low value of girl child, neglect of girl child resulting in higher mortality at younger age, female infanticide, female foeticide, higher childhood mortality and male bias in enumeration of population.

(c) Imbalance in the sex-ratio may lead to further decline in the status of women, increase in violence against women practices of polyandry etc.

(d) Ministry of Health & Family Welfare has undertaken training of trainers from State Judicial Academies to train lower judiciary with the objective to sensitize the judiciary on the issue. National Inspection and Monitoring Committee (NIMC) having representatives of Department of Women & Child Development, National Commission for Women, Indian